

Artist _____
Telep _____

Artist ERNEST F. RUPPE (Please print plainly)

Telephone No. CE 0217 Address 11819 WOODLAND AVE. 20
Zone No. _____

Zone No. _____

Please Enclose Registration Fee of \$1.00 (Check or Money Order) With Entry Blank

[illegible]

Entry blanks must be filled out and returned to the Museum on or before April 2, those postmarked later than April 2 will not be accepted.

Entries must be delivered at the Museum between 9 A.M. and 5 P.M. from April 6 to April 13 (except Sunday).

LIST OF CLASSES ON BACK